

**UNIFORM HAZARDOUS
WASTE MANIFEST**

3. Generator's Name and Mailing Address KIMBERLY-CLARK 2001 E. ORANGE THORPE AVE. FULTON CA. 92639		1. Generator's US EPA ID No. CA1D0101915141713713	Manifest Document No. 010101016	2. Page 1 of / 1	Information in the shaded areas is not required by Federal law.		
4. Generator's Phone (714) 670-7478				A. State Manifest Document Number 81273473			
5. Transporter 1 Company Name CROSBY & OVERTON TRANS.		6. US EPA ID Number 1C4A1D01417141811710			B. State Generator's ID H141M0316100701416		
7. Transporter 2 Company Name		8. US EPA ID Number 1C4A1D01412141501011			C. State Transporter's ID 1083749		
9. Designated Facility Name and Site Address OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD WHITTIER, CA. 90602		10. US EPA ID Number			D. Transporter's Phone (213) 433-5445		
					E. State Transporter's ID CAD0412245001		
					F. Transporter's Phone (213) 699-0991		
11. US-DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No. Type	13. Total Quantity	14. Unit Wt/Vol	Waste No.		
a. WASTE COMBUSTIBLE LIQUID, NOS NA1993		01011	TITANIC	1756	State 272	EPA/Other DO00	
b.					State	EPA/Other	
c.					State	EPA/Other	
d.					State	EPA/Other	
J. Additional Descriptions for Materials Listed Above a. POLYMER, OIL, & WATER				K. Handling Codes for Wastes Listed Above a. 01	b.		
				c.	d.		

15. Special Handling Instructions and Additional Information
OVAG RESP.

11826

16. **GENERATOR'S CERTIFICATION:** I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.
If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name Walter Cordell III		Signature Walter Cordell	Month Day Year 10/14/07 1816
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name FRANK WILSON		Signature Frank Wilson	Month Day Year 10/18/10 171818
18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name		Signature	Month Day Year
19. Discrepancy Indication Space			
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name N. JAY Salomon.		Signature N. Jay Salomon	Month Day Year 11/11/171818

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802; WITHIN CALIFORNIA CALL 1-800-852-7550

TRANSPORTER
NAME
FACILITY